

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>8/3/00</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>59158</i>	<i>9-27-00</i>

INDEX OF CLAIMS *6153830*

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral) Canceled A Appeal
+ Restricted O Objected

01/19/01

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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